

SECTION A: SEAT BELTS

1.How often do you use seat belts when you drive or ride a car?

Would you say:		Always.....	1
		Nearly always.....	2
		Sometimes.....	3
		Seldom	4
		Or Never	5

Do not read these responses		Don't know/Not sure.....	7
		Never drive/ride in a car....	8
		Refused.....	9

SECTION B: HYPERTENSION

These next questions are about hypertension or high blood pressure.

2.About how long has it been since you had your blood pressure taken by a doctor, nurse or other health professional?

Was it:Please read

		Within the past year..... (0 to 12 months).....	1
		Within the past 2 years.....(13-24 months)....	2
		Within the past 5 years.....(25-60 months)....	3
		More than five years ago...(61+months).....	4
(Don't read these responses)	←	Don't know/Not sure.....	7
		Never.....	8
		Refused.....	9

3.Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

(PROBE FOR DOCTOR, NURSE OR OTHER HEALTH PROFESSIONAL.)

Skip to Section C ←-----	No.....	1
	Yes, by doctor.....	2
	Yes, by nurse.....	3
	Yes, by other health professional.....	4
Skip to Section C <-----	Don't know/Not sure.....	7
	Refused	9

4. Have you been told on more than one occasion that your blood pressure was high, or have you been told this only once?

Miles and Tenths	__.	__
Don't Know/Not Sure.....	777	
Refused.....	999	

9. How many times per week or per month did you take part in this activity during the past month?

Times per week.....1 _ _

Or

Times per month.....2 _ _

Don't know/Not sure.....777

Refused.....999

10. And when you took part in this activity for how many minutes or hours did you usually keep at it?

Hours & Minutes..... : _ _

Don't know/Not sure.....777

Refused.....999

11. Was there another physical activity or exercise that you participated in during the last month?

Yes.....1

No.....2

(Go to Section D) ←----- Don't know/Not sure.....7

Refused.....9

12. What other type of physical activity gave you the next most exercise during the past month?

OFFICE ONLY
See coding list A--Activity

Activity..... _ _

Don't know/Not Sure.....77 (Go to Section D)

Refused.....99

Ask question 13 only if answer to Q12 is running, jogging, walking or swimming. All others go to Q14

13. How far do you usually walk, jog, run or swim?

See coding List B if
answer not in miles and
tenths

Miles and Tenths _ . _

Don't Know/Not Sure.....777

Refused.....999

14.How many times per week or per month did you take part in this activity?

Times per week.....1 _ _

OR

Times per month.....2 _ _

Don't know/Not sure.....777

Refused.....999

15. And when you took part in this activity for how many minutes or hours did you usually keep at it?

Hours & Minutes..... : _ _

Don't know/Not sure.....777

Refused.....999

SECTION D : WEIGHT CONTROL PRACTICES

The next few questions are about efforts to lose weight.

16.Are you now trying to lose weight?

(Go to Section E) ← | Yes.....1
No.....2
Refused.....9

17.Are you eating fewer calories to lose weight?

Yes..... 1

No..... 2

Don't know/Not sure.....7

Refused9

18.Have you increased your physical activity to lose weight?

Yes..... 1

No..... 2

Don't know/Not sure.....7

Refused9

Section E: Tobacco Use

19. Have you smoked at least hundred cigarettes in your life?

(100 cigarettes=5packs)	Yes.....	1
	No...(Go to Section E).....	2
(Go to Section E) ←	Don't know /Not sure.....	8
	Refused.....	9

20. About how old were you when you first started smoking cigarettes fairly regularly?

Code age in years.....	— —
Don't know/Not sure.....	7 7
Refused.....	9 9

21. Do you smoke cigarettes now?

Yes.....	1
No...(Go to Q.24).....	2
Refused...(Go to Section F).....	9

22. On an average how many cigarettes a day do you smoke now?

(1pack=20 cigarettes)	Number of cigarettes.....	— —
	Don't smoke regularly.....	88
	Refused.....	99

23. During the past 12 months, have you quit smoking for 1 day or longer?

(Go to Sec F) ←	Yes.....	1
	No.....	2
	Don't know/Not sure.....	7
	Refused	9

24. About how long has it been since you last smoked cigarettes regularly?

	Less than one day.....	1
	One to 6 days.....	2
	Seven days to less than three months.....	3
	Three months to less than 6 months.....	4
	Six months to less than one year.....	5
	1 or more years.....	6
(Don't read) ←	Don't know/Not sure.....	7
	Refused.....	9

Section F: Alcohol Consumption

These next few questions are about the use of beer, wine, wine coolers, cocktails or liquor such as vodka, gin, rum or whiskey-all kinds of alcoholic beverages that people drink at meals, special occasions or when just relaxing.

25. Have you had any beer wine or liquor during the past month that is, since _____?

Yes.....1
No...(Go to section G).....2
Refused...(Go to Section G).....9

26. During the past month, how many days per week or per month did you drink any alcoholic beverages, on the average?

Days per week..... 1 _ _
Or
Days per month..... 2 _ _
Don't know /Not sure (Go to Q.28). 7 7 7
Refused.... (Go to Q.28)..... 9 9 9

27. A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor. On the days when you drank beer how many drinks did you drink on the average?

Number of drinks..... _ _
Don't know/Not sure..... 7 7
Refused.....99

28. Considering all types of alcoholic beverages, that is beer, wine, wine coolers, cocktails and liquor as drinks, how many times during the past month did you have 5 or more drinks on an occasion?

Number of times..... _ _
None..... 88
Don't Know/Not Sure..... 77
Refused.....99

29. And during the past month, how many times have you driven when you've had perhaps too much to drink?

Number of times..... _ _
None..... 88
Don't Know/Not Sure..... 77
Refused.....99

Section G: Preventive Health Practices

Some people visit a doctor for a routine checkup, even though they are not feeling well and have not been sick.

30. About how long has it been since you last visited a doctor for a routine checkup?

Was it: **Please read**

Within the past year..... (0 to 12 months).....	1
Within the past 2 years..... (13-24 months)....	2
Within the past 5 years..... (25-60 months)....	3
More than five years ago... (61+months).....	4
Don't know/Not sure.....	7
Never.....	8
Refused.....	9

These next questions are about blood cholesterol, which is a fatty substance in the blood.

31. Have you ever had your blood cholesterol checked?

Yes.....	1
No.... (Go to Q 36).....	2
Don't know/Not sure (Go to Q.36).....	7
Refused... (Go to Q.36).....	9

32. About how long has it been since you last had your blood cholesterol checked?

Was it: **Please read**

Within the past year..... (0 to 12 months).....	1
Within the past 2 years..... (13-24 months)....	2
Within the past 5 years..... (25-60 months)....	3
More than five years ago... (61+months).....	4
Don't know/Not sure.....	7
Never.....	8
Refused.....	9

33. Have you ever been told your blood cholesterol level, in numbers?

Yes.....	1
No... (Go to Q.35).....	2
Don't know/Not sure... (Go to Q.35).....	7
Refused .. (Go to Q.35).....	9

34.What is your blood cholesterol level?

Record the number.....	
Don't know/Not sure.....	7 7 7
Refused.....	9 9 9

35.Have you ever been told by a doctor or other health professional that your blood cholesterol is high?

Yes.....	1
No.....	2
Don't know/Not sure.....	7
Refused.....	9

36.Next I would like to ask you about diabetes, sometimes called sugar diabetes. Have you have been told by a doctor that you have diabetes?

Yes.....	1
No.....	2
Don't know/Not sure.....	7
Refused.....	9

Section H : Health Insurance

These next questions are about health care plans, which include health insurance, prepaid plans such as HMOs (Health maintenance organizations) or government plans such as Medicare.

37.Do you have any kind of health care plan?

(Go to Q.41) ←	Yes.....	1
	No.....	2
	Don't know/Not sure.....	7
	Refused.....	9

38.For hospital bills, does your health care plan cover all, most, some, or none of your expenses?

All.....	1
Most.....	2
Some.....	3
None.....	4
Don't know/Not sure.....	7
Refused.....	9

39. For visits to a doctor's office when you are sick, does your health care plan cover all, most, some, or none of your expenses?

All.....	1
Most.....	2
Some.....	3
None.....	4
Don't know/Not sure.....	7
Refused.....	9

40. When you are not sick, does your health care plan cover all, most, some or none of your checkups or other preventive services?

All.....	1
Most.....	2
Some.....	3
None.....	4
Don't know/Not sure.....	7
Refused.....	9

41. Was there a time during the last 12 months when you needed to see a doctor but could not due to the cost?

All.....	1
Most.....	2
Some.....	3
None.....	4
Don't know/Not sure.....	7
Refused.....	9

Section I: Demographics

And finally, these last few questions ask for a little more information about yourself.

42. How old were you on your last birthday?

Code age in years.....	__
Do not remember/Not sure.....	07
Refused.....	09

43. What is your race?

White.....	1
Black.....	2
Asian or Pacific Islander.....	3

Aleutian, Eskimo or American Indian..	4
Other specify	5
Don't Know/Not Sure.....	7
Refused.....	9

44.Are you of Hispanic origin such as Mexican, American, Latin American, Puerto Rican or Cuban?

Yes.....	1
No.....	2
Don't know /Not sure.....	7
Refused.....	9

45.What is the highest grade or year of school you completed?
(Read only if necessary)

Eighth grade or less.....	1
Some high school.....	2
High school grad or GED certificate.....	3
Some technical school.....	4
Technical school graduate.....	5
Some college.....	6
College Graduate.....	7
Post Grad or Professional Degree.....	8
Refused.....	9

46.Are you currently:

Employed for wages.....	1
Self Employed.....	2
Out of work for more than one year.....	3
Out of work for less than one year.....	4
Homemaker.....	5
Student.....	6
Retired.....	7
Refused.....	9

47.And are you

Married.....	1
Divorced.....	2
Widowed.....	3
Separated.....	4
Never been married.....	5

Member of an unmarried couple.....6
 Refused.....9

48. Which of the following categories best describe your annual household income from all sources?

Less than \$10 000.....1
 \$10 to \$15 000.....2
 \$15 to \$20 000.....3
 \$ 20 to \$25 000.....4
 \$25 to \$35 000.....5
 \$35 to \$50 000.....6
 Over \$50000.....8
 Don't Know/Not Sure.....7
 Refused.....9

49. About how much do you weigh without shoes?

Weight.....(Pounds)
 Don't know /Not sure.....777
 Refused.....999

50. About how tall are you without shoes?

Height.....Ft inches
 Don't know /Not sure.....777
 Refused.....999

51. INTERVIEWER: INDICATE SEX OF RESPONDENT
 (Ask if necessary)

Male.....1
 Female.....2

SECTION J: WOMEN'S HEALTH

These next questions are about mammograms, which are x-ray tests of the breast to look for cancer.

52. Have you ever had a mammogram?

Yes.....1
 No.....(Go to Q.56).....2
 Don't know/Not sure...(Go to Q.56).....7

Refused.....(Go to Q.56).....9

53.About how long has it been since you had your last mammogram?

Was it: **Please read**

Go to Q.51

← Within the past year..... (0 to 12 months).....1
Within the past 2 years.....(13-24 months)....2
Within the past 5 years.....(25-60 months)....3
More than five years ago...(61+months).....4
Don't know/Not sure.....7
Never.....8
Refused.....9

54.Was your last mammogram done as part of a routine checkup, because of a breast problem, or because you've already had a breast cancer?

Routine checkup.....1
Breast problem.....2
Had breast cancer.....3
Don't know/Not sure.....7
Refused.....9

55.Whose idea was it for you to have this last mammogram-was it your idea, your doctor's idea, or someone else's idea?

(Probe for the most influential. Record only one response)

Respondent's idea.....1
Doctor's idea.....2
Someone else's idea.....3
Don't know/Not sure.....7
Refused.....9

The next questions are about breast physical examination, which is when the breast is felt for lumps by a doctor or medical assistant.

56.Have you ever had a breast physical examination by a doctor or medical assistant?

Yes.....1
No.....(Go to Q.59).....2
Don't know/Not sure...(Go to Q.59).....7
Refused.....(Go to Q.59).....9

57. About how long has it been since your last breast physical exam?

Was it:

Within the past year..... (0 to 12 months).....	1
Within the past 2 years..... (13-24 months)....	2
Within the past 5 years..... (25-60 months)....	3
More than five years ago... (61+months).....	4
Don't know/Not sure.....	7
Never.....	8
Refused.....	9

58. Was your last breast physical exam done as part of a routine checkup, because of a breast problem, or because you have already breast cancer?

Routine checkup.....	1
Breast Problem.....	2
Had breast cancer.....	3
Don't know /Not sure.....	7
Refused.....	9

The next questions are about PAP smears, which test for the cancer of the cervix or uterus

59. Have you ever heard of PAP smear test?

Yes.....	1
No..... (Go to Q.62).....	2
Don't know/Not sure... (Go to Q.62).....	7
Refused..... (Go to Q.62).....	9

60. Have you ever had a PAP smear?

Yes.....	1
No..... (Go to Q.62).....	2
Don't know/Not sure... (Go to Q.62).....	7
Refused..... (Go to Q.62).....	9

61. When did you have your last PAP smear?

Was it:

Within the past year..... (0 to 12 months).....	1
Within the past 2 years..... (13-24 months)....	2
Within the past 5 years..... (25-60 months)....	3
More than five years ago... (61+months).....	4
Don't know/Not sure.....	7
Never.....	8
Refused.....	9

62. Have you had a hysterectomy?

Hysterectomy is an operation to remove the uterus

Yes.....(Go to section K).....1
No.....2
Don't know /Not sure.....7
Refused.....9

Interviewer: Ask this question only to females between 18 and 45 otherwise Go to Q.65 below

63. To your knowledge, are you now pregnant?

(Go to Section K) ← Yes.....1
No.....2
Don't know/Not sure.....7
Refused.....9

64. During what month is your baby due?

Code Month

(Jan 01----Dec12)

Code month.....
Don't know /Not sure..... 7 7
Refused.....9 9

SECTION K: AIDS

These next few questions are to determine your beliefs and opinions about the national health problem of AIDS.

65. Have you ever heard the AIDS virus called HIV?

Yes.....1
No.....2
Don't know /Not sure.....7
Refused.....9

66. To your knowledge are there drugs available which can lengthen the life of a person infected with AIDS virus?

Yes.....1
No.....2
Don't know /Not sure.....7
Refused.....9

67. Do you think a person infected with AIDS virus can look and feel well and healthy?

Yes.....	1
No.....	2
Don't know /Not sure.....	7
Refused.....	9

68. Do you think you can get infected with AIDS or the AIDS virus from:

	Yes	No	Dk/Ns	Ref
Donating blood.....	1	2	7	9
Being cared for by a Nurse doctor, dentist or other health care worker who has the AIDS virus	1	2	7	9

69. Do you think a pregnant woman who has the AIDS virus can give it to her baby?

Yes.....	1
No.....	2
Don't know /Not sure.....	7
Refused.....	9

70. Do you have a child or children in kindergarten through eighth grade?

	Yes.....	1
	No.....	2
(Go to Q.73) ←	Don't know /Not sure.....	7
	Refused.....	9

71. Would you allow your child to be in the same classroom with a child who is infected with the AIDS virus?

Yes.....	1
No.....	2
Don't know /Not sure.....	7
Refused.....	9

72. At what grade do you think your child should begin AIDS education in school?

Code grade.....	—
Never.....	8 8
Don't know /Not sure.....	7 7
Refused.....	9 9

73. Would you eat in a restaurant where the cook is infected with AIDS virus?

Yes.....1
No.....2
Don't know /Not sure.....7
Refused.....9

74. Would you be willing to work with a person who is infected with AIDS virus?

Yes.....1
No.....2
Don't know /Not sure.....7
Refused.....9

75. Where could you go to be tested for the AIDS virus infection?

(Probe for other places if only one response is given)

Facility code..... _ _
Where else could you go..... _ _

Please do not read list.

Private Doctor, HMO.....01
Blood bank, Plasma Center, Red Cross.....02
Health department.....03
AIDS Clinic, AIDS testing site.....04
Hospital, Emergency Room.....05
Family Planning Clinic.....06
STD clinic.....07
Community health clinic /Primary health clinic.....08
Company or Industry clinic.....09
Military induction or examination.....10
Other.....87
No Place.....88
Don't know /Not sure.....77
Refused.....99

76. Some people use condoms from getting the AIDS virus through sexual activity. How effective do you think using a condom is in preventing getting the AIDS virus through sexual activity?

Would you say:

Very effective.....1
Somewhat effective.....2
Not at all effective.....3
Don't know how effective.....4

Don't know Method.....5
Refused.....9

65.How many telephone numbers will reach this household including the number I used today?

(Differentiate between telephone numbers and telephone sets if necessary. Include all telephone numbers that can reach this household)

Total Telephone Numbers.....

MODULE 6: Dietary Fat

The next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one; for example, twice a week, thrice a month, and so forth. Remember I am only interested in the foods you eat. Include all the foods you eat, both at home and away from home.

1.How often do you eat hot dogs or lunchmeats such as ham or other cold cuts?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7
Refused.....9 9 9

2.How often do you eat bacon or sausage?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7
Refused.....9 9 9

3.How often do you eat pork other than ham, bacon or sausage?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7

Refused.....9 9 9

4.How often do you eat hamburgers, cheeseburgers or meatloaf?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7
Refused.....9 9 9

5.How often do you eat beef other than hamburger, cheeseburger or meatloaf?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7
Refused.....9 9 9

6.How often do you eat fried chicken?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7
Refused.....9 9 9

7.How often do you eat French fries or fried potatoes?

Per day..... 1 _ _
Per Week.....2 _ _
Per Month.....3 _ _
Per Year.....4 _ _
Never.....5 5 5
Don't know/Not sure.....7 7 7
Refused.....9 9 9

8.Hw often do you eat cheese or cheese spreads not including cottage cheese?

Interviewers: Include cheese used as an ingredient, eg on pizza

Per day..... 1 _ _
Per Week.....2 _ _

Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

9.How often do you eat doughnuts, cookies, cake pastry or pies?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

10.How often do you usually eat snacks, such as chips or popcorn?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

11.How often do you add butter or margarine to bread rolls or vegetables?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

12.How many eggs do you usually eat?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

13. How many glasses (8oz) of milk do you usually drink? Remember to include drinks made with whole milk or milk on cereal. Do not include low fat milk, such as skim milk or 2% milk.

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

Module 9: Fruits and Vegetables:

1. How often do you drink fruit juices such as orange, grapefruit or tomato?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

2. Not counting juice, how often do you eat fruit?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

3. How often do you eat green salad?

Per day.....	1	—	—
Per Week.....	2	—	—
Per Month.....	3	—	—
Per Year.....	4	—	—
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

4. How often do you eat potatoes (not including French fries, fried potatoes or potato chips)?

Per day.....	1	_	_
Per Week.....	2	_	_
Per Month.....	3	_	_
Per Year.....	4	_	_
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

5.How often do you eat carrots?

Per day.....	1	_	_
Per Week.....	2	_	_
Per Month.....	3	_	_
Per Year.....	4	_	_
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

6.Not counting carrots, potatoes or salad, how many servings of vegetables do you usually eat? (For example a serving of vegetables at both lunch and dinner would be two servings)

Per day.....	1	_	_
Per Week.....	2	_	_
Per Month.....	3	_	_
Per Year.....	4	_	_
Never.....	5	5	5
Don't know/Not sure.....	7	7	7
Refused.....	9	9	9

OCCUPATION AND INDUSTRY:

What is your usual occupation, that the job you have worked for the most of your life?

Specify _____ Code _____

What type of industry does this job involve?

Specify _____ Code _____

